2017 Dec-29 PM 02:10 U.S. DISTRICT COURT N.D. OF ALABAMA

Pro Se 14 (Rev. 09/16) Complaint for Violation of Civil Rights (Prisoner)

# UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ALABAMA 101 20 29 1- 20

	George Monton MATThews  Plaintiff  (Write your full name. Na more than one plaintiff may be named in a complaint.)	DC 17-4873.3. DC 17-48731.2. DC/7-4871
	-V-	) Case No.
		) (to be filled in by the Clerk's Office) )
		5:17-cv-02195-VEH-JHE
The	Mayor of Madison County Madison County-City P Defendants	) )
	(Write the full name of each defendant who is being sued. If the	)
	names of all of the defendants cannot fit in the space above, please	)
	write "see attached" in the space and attach an additional page	)
	with the full list of names. Do not include addresses here. Your	)
	complaint may be brought in this court only if one or more of the	)
	named defendants is located within this district.)	

#### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee of \$400.00 or an Application to Proceed *In Forma Pauperis*.

Mail the original complaint and the filing fee of \$400.00 or an Application to Proceed *In Forma Pauperis* to the Clerk of the United States District Court for the Northern District of Alabama, Room 140, Hugo L. Black U.S. Courthouse, 1729 5th Avenue North, Birmingham, Alabama 35203-2195.

## I. The Parties to this Complaint

#### A. The Plaintiff

Provide the information below for the plaintiff named in the complaint.

Name	George Monto	n MATThews	
All other names by which you have been known:	<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	
ID Number	55N# 6915 /	MN/# 02376	9
Current Institution	MADISON Count	y Metro Sail	
Address	PO BOX 2047		
	Huntsville	AL	35804
	Citv	State	Zio Code

## B. The Defendant(s)

Defendant No. 1

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Name	hintrulk City Police Department
Job or Title (if known	K-9 unit of Huntsville Police Department
Shield Number	unknown
Employer	Madison Country Sheriff Huntsville city Police
Address	Department 315 whoeler AVE
	Huntsville AL 3580
	City State Zip Code
	Individual Capacity 💆 Official Capacity
Defendant No. 2	
Name	The Mayor of Huntsville Madison County
Job or Title (if know	and Head of STAFF Huntsville Police Department
Shield Number	untroum
Employer	Madison County   City Police Department
Address	715 wheeler Avenue
	Muntsville AL 3580
	City State Zip Code
	Individual Capacity A Official Capacity

Defend	lant No. 3					
N	ame					
Jo	ob or Title (if known)					
S	nield Number	•	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	······································	PP-00-00-00-00-00-00-00-00-00-00-00-00-0	
Ε	mployer		***************************************			***************************************
A	ddress					
			City		State	Zip Code
		П	Individual Capacity		Official Capacity	<b>,</b>
Defend	iant No. 4	_	individual Capacity	<b>4</b>	Critician Capaving	
	ame					
	ob or Title <i>(if known)</i>					****
	hield Number					
_	mployer			***************************************		····
	ddress					
		,	City	,	State	Zip Code
		L	Individual Capacity		Official Capacity	
Bas	is for Jurisdiction					
priv <i>Nar</i>	der 42 U.S.C. § 1983, you may vileges, or immunities secure med Agents of Federal Burea violation of certain constitut	d by t u of l	he Constitution and [fed Narcotics, 403 U.S. 388	lera; la	w]." Under <i>Bivens</i> v.	Six Unknown
A.	Are you bringing suit again	ist <i>(cl</i>	heck all that apply):			
	☐ Federal officials (a Bi	vens	claim)			
	State or local officials (a § 1983 claim)					
В.						
,	force Police's Police K-9/Dog Brutality, unto the Black (Afre					
/· - <b>i</b> c	ent the white is	ity (	5) of Huntsville	Mad	ison county,	for DO NOT
11	- · · · · · · · · · · · · · · · · · · ·	e march	3	Uja	ich lives mai	

П.

	C.	Plaintiffs suing under <i>Bivens</i> may only recover for violation of certain constitutional rights. If you are suing under <i>Bivens</i> , what constitutional right(s) do you claim is/are being violated by federal officials?
	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
III.	Pris	oner Status
	Indi	cate whether you are a prisoner or other confined person as follows (check all that apply):
		Pretrial Detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
	100	Other Detained in Mudison County Metro Sil
IV.	Sta	tement of Claim
	in t incl clai	te as briefly as possible the facts of your case. Describe how each defendant was personally involved the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to ude further details such as the names of other persons involved in the events giving rise to your ms. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write nort and plain statement of each claim in a separate paragraph. Attach additional pages if needed.
	Α.	If the events giving rise to your claim arose outside an institution, describe where and when they arose. Lodge Road Area & August 2017 [Mastin Lake 17] + Surdan Lune ?  **Mastin Lake 17] **  **Mast
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose.

C. What date and approximate time did the events giving rise to your claim(s) occur?
8 Aug 2017 / / AM - 12 NOON
D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?  Was anyone else involved? Who else saw what happened? I was Apprehended fat on the ground Surrounded by City Police(s) at Gun foint, I gave no resistance I gave no Strupple, I obeyed All orders from police yet still in broad day light after Channe/3/ News and Ambulance Pulled up the K-9 unit later arrived and was deliberately put over the fence and giving the police K-9 (K://) Attack command, when I was in Plain sight in compliance. Not to Injuries Farget opened boy K-9 Dog Bite, but falm of my Hund
If you sustained injuries related of the events alleged above, describe your injuries in detail.
The German Shepherd Police K-9 chewed and maneled my uffer and under left arm
I Was up I have War to Da Ha come Classed 2/16 che & Dat Willed The
to request the Court to subpoena, I also like for that Anchorwoman to be subpoens of my witness, the way I was done is An racistissue.  VI. Relief
State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or
statutes. If requesting money damages, include the amounts of any actual damages and/or punitive
damages claimed for the acts alleged. Explain the basis for these claims.
I reguest Financial compensation for loss of home, Job, Pain
and suffering, slunder of charges, Any And All hospital
and future Theraputic Bills, for I've not gained full usage
of Both Arm Limbs especially my whole coffer Left Arm/Top And
under Arm chered up badh scarred Dange Physically I've
got Phoehia of Dogs PTSD" sleeping Disorders and fear of Huntsull
City folice "Black Lives Matters"

#### VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1982 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	☐ Yes
	™ No
I	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).  The planed while During Arresst on the street: There are no grievence.
В.	happened while During Arresst on the street: There are No grievence Procedures against Madison County-city police while during incorporation inside Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	□ Yes
	□ No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	□ Yes
	□ No
	Do not know
	If yes, which claim(s)?

D.		you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose cerning the facts relating to this complaint?
		Yes
	P	No
		o, did you file a grievance about the events described in this complaint at any other jail, prison, ther correctional facility?
		Yes
	*	No
E.	If yo	ou did file a grievance:
	1.	Where did you file the grievance?
		NÍA
	2.	What did you claim in your grievance?
		_W/A
	3.	What was the result, if any?
		No results - this incident Did not happen in Juli
	4.	What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
	4	None - The Madison County Metro Jul; unto the best of my Knowledge does not have In-House grievence forms Against feace officers that an injure can use?

VIII.

A.	Have you filed other lawsuits in state or federal court dealing with the same facts involved in the action?				
		Yes			
	P	No			
B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (In there is more than one lawsuit, describe the additional lawsuits on another page, using the sair format.)					
	1.	Parties to the previous lawsuit			
		Plaintiff(s)			
		Defendant(s)			
	2.	Court (if federal court, name the district; if state court, name the county and State)			
	3.	Docket or index number			
	4.	Name of Judge assigned to your case			
	5.	Approximate date of filing lawsuit			
	6.	Is the case still pending?			
		□ Yes			
		□ No			
	If n	o, give the approximate date of disposition.			
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?			

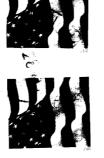
### IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Printed Name of I	Plaintiff	<u>George</u>	MATTHE	<u>ws</u>	
Prison Identification #		023769	MAU	SON Con	unty Jai
Prison Address		P.O. Box 2	047		1
		Huntsville City		State	35801 Zip Co
Date of signing:	12-2/-/ Signature of Pla	Matthews			
I declare under pe	enalty of perjury th	at the foregoing is t	rue and correct	<b>.</b>	
Executed on _	/2-2/-/7 (Date)				

Case 5:17-cv-02195-ACA-JHE Document 1 Filed 12/29/17 Page 11 of 11



Hist of the United-States First Gurt & For the Northern frict of Alabama-Room, 140

George MATThems 023769
8.0. Box 2047
Hury Me, AL 35804
Madison county 521 220

Western Heart of the State of the Hallest State of the St